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CONFIRMATION NO. 2761

Bib Data Sheet

SERIAL NUMBER 09/766,596	FILING DATE 01/23/2001 RULE	CLASS 034	GROUP ART UNIT 3749	ATTORNEY DOCKET NO. 503.30414V22
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APPLICANTS

Shigekazu Kato, Kudamatsu-Shi, JAPAN;
 Kouji Nishihata, Tokuyama-Shi, JAPAN;
 Tsunehiko Tsubone, Hikara-Shi, JAPAN;
 Atsushi Itou, Kudamatsu-Shi, JAPAN;

**** CONTINUING DATA *******

PAN 12/17/01 THIS APPLICATION IS A DIV OF 09/461,432 12/16/1999 PAT 6,330,755
 WHICH IS A CON OF 09/177,495 10/23/1998 PAT 6,012,235
 WHICH IS A CON OF 09/061,062 04/16/1998 PAT 5,950,330
 WHICH IS A CON OF 08/882,731 06/26/1997 PAT 5,784,799
 WHICH IS A DIV OF 08/593,870 01/30/1996 PAT 5,661,913
 WHICH IS A CON OF 08/443,039 05/17/1995 PAT 5,553,396
 WHICH IS A DIV OF 08/302,443 09/09/1994 PAT 5,457,896
 WHICH IS A CON OF 08/096,256 07/26/1993 PAT 5,349,762
 WHICH IS A CON OF 07/751,952 08/29/1991 ABN

**** FOREIGN APPLICATIONS *******

JAPAN 02-225321 08/29/1990

PAN
**IF REQUIRED, FOREIGN FILING LICENSE
 GRANTED ** 06/26/2001**

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY JAPAN	SHEETS DRAWING 1	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 17
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>P. Wilson</i> Examiner's Signature	Initials			

ADDRESS

024057

TITLE

Vacuum processing apparatus and operating method therefor—

FILING FEE RECEIVED 1218	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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BIBDATASHEET

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**** CONTINUING DATA *******

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35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature Initials				

ADDRESS

020457

TITLE

VACUUM PROCESSING APPARATUS AND OPERATING METHOD THEREFOR

FILING FEE RECEIVED 1626	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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